

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000005360

FILED
Jun 28, 2006
Secretary of State

Entity Name: KITTERMAN MAIL TRANSPORT, INC.

Current Principal Place of Business:

4205 EAST NETTLETON
JONESBORO, AR 72401

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5022
JONESBORO, ZR 72403

New Mailing Address:

FEI Number: 46-0515271 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KITTERMAN, BERRY
112 OAK LANE
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BERRY L KITTERMAN

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KITTERMAN, MICHAEL
Address: 624 SHADOW LANE
City-St-Zip: JONESBORO, AR 72401

Title: STD () Delete
Name: KITTERMAN, BERRY LYNN
Address: 112 OAK LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: KITTERMAN, CHRISTOPHER S
Address: 112 OAK LANE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VP () Change (X) Addition
Name: MALMSTEDT, MICHAEL H
Address: 600 N. ATLANTIC BLVD. #610
City-St-Zip: DAYTONA BEACH, FL 32118 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BERRY L KITTERMAN

STD

06/28/2006

Electronic Signature of Signing Officer or Director

Date